



**INFORMATION RELEASE AUTHORIZATION
FOR EMPLOYMENT CONSIDERATION
STATE OF NORTH DAKOTA
SFN 51915 (4/05)**

BCI Use Only	
Check #	
Amount	
Receipt #	
SID #	
Dept. #	Div. #

General Instructions:

- Hiring authorities may provide a copy of this completed release form to reference and/or criminal background records check sources when checking an applicant's references or background.
- Agencies requesting Criminal History Record Information through the Bureau of Criminal Investigation must send this completed form and the \$15 fee to: Criminal Records Section, ND Bureau of Criminal Investigation, P O Box 1054, Bismarck ND 58502-1054. Payment of the fee can be made by check or money order payable to North Dakota Attorney General or through Interdepartment Billing (IDB). If paying by IDB, please include department number and, if applicable, division number.

I. To Be Completed by Hiring Authority			
Agency Name			
Name of Hiring Authority		Telephone Number	Fax Number
Address			
City		State	Zip
Type of Background Check to be Conducted (check all that apply): <input type="checkbox"/> Personal and/or Professional References <input type="checkbox"/> Criminal Background Records Check			
II. To Be Completed by Applicant			
Last Name		First Name	Middle Name
Other Name(s) Used (Maiden, Former, AKA, Etc.)			
Last		First	Middle
Birth Date (Required for criminal background check)		Social Security Number (Required for criminal background check)	
Current Address			
City		State	Zip
<p>As an applicant for employment with the state agency identified above, I understand that a criminal background records check may be completed. I hereby waive and release the state of North Dakota, its officers, employees, and agents, both in their official and individual capacities, from any and all legal liability for damages that result from the furnishing or receiving of such criminal records information.</p> <p>In addition, in order to provide the state agency identified above with information and opinion that may be useful to the agency in its hiring decision, I hereby authorize any person, school, current or former employer, organization, or entity disclosed in my resume, application, or interview process to provide any information regarding me. This information and opinion may include but is not limited to my dates of employment, job title and classification, compensation history, reasons for leaving, job-related knowledge and skills, job performance, attendance record, disciplinary action, and general character. I understand that the information and opinion provided about me may be negative or positive. I unconditionally release each person, school, employer, organization or other entity who provides information or opinion regarding myself from any and all legal liability from damages that may result from furnishing such information and in making such statements. This release supercedes any agreement or contract I may have previously made to the contrary with any such person, school, employer, organization, or other entity. I further release the state of North Dakota, its officers, employees, and agents, both in their official and individual capacities, from any and all legal liability for damages that result from the use or disclosure of such information.</p> <p>A photocopy of this signed release shall have the same force and effect as the original release executed by me below.</p>			
Applicant's Signature		Date	
Witness Signature	Date	Witness Signature	Date